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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *NONE*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *AL*

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## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY IRELAND	SHEETS DRAWING 3	TOTAL CLAIMS 6	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after				
Verified and Acknowledged	<i>Shawn</i> <i>AL</i> Examiner's Signature Initials				

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## TITLE

Network area storage block and file aggregation

FILING FEE RECEIVED 740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
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